(SEP 9.1 2005 (B)	h applicable fee(s), to: <u>Ma</u> or <u>Fa</u>	Commissioner in P.O. Box 1450 Alexandria, Virus (571) 273-2885	for Patents ginia 22313-1450	
STRUMONS: This form should be used for trans supplied All further correspondence including the P icated areas corrected between or directed otherwise intenance of height and the corrected otherwise	mitting the ISSUE FEE and PU atent, advance orders and notific in Block 1, by (a) specifying a n	IBLICATION FEE (if requation of maintenance fees new correspondence address	uired). Blocks 1 through 5 sh will be mailed to the current os; and/or (b) indicating a separ	ould be completed where correspondence address as ate "FEE ADDRESS" for
CURRENT CORREST CHORNES (Note: Use Block) for a		Note: A certificate of Fee(s) Transmittal. T papers. Each addition have its own certification	of mailing can only be used for this certificate carnot be used for nal paper, such as an assignmen- ate of mailing or transmission.	domestic mailings of the or any other accompanying it or formal drawing, must
Hamre, Schumann, Mueller & L PO Box 2902-0902	arson P.C.	I hereby certify that States Postal Service addressed to the Mi transmitted to the IIS	ertificate of Mailing or Transr this Fee(s) Transmittal is being with sufficient postage for first ail Stop ISSUE FEE address: EFTO (571) 273-2885, on the da	deposited with the United telass mail in an envelope above, or being facsimile the indicated below
Minneapolis, MN 55402		Antonette P		(Depositor's name)
		Salout	24 2005	(Signature)
		September		(Datz)
APPLICATION NO. FILING DATE 10/601,287 06/20/2003	FIRST NAMED I		ATTORNEY DOCKET NO. 10873.1199US01	CONFIRMATION NO.
LE OF INVENTION: METHOD FOR DESIGNING APPLN. TYPE SMALL ENTITY	ISSUE FEE	PUBLICATION FEB	TOTAL FEE(S) DUE	DATE DUE
nonprovisional NO	\$1400	\$300	\$1700	10/27/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS	7	
DIMYAN, MAGID Y	2825	716-006000		
hange of correspondence address or indication of "Fer R 1.363). Address form PTO/SB/1/22) attached.	Correspondence (1) the name or agents OR	ng on the patent front page, so of up to 3 registered pate, t, alternatively,	ent attorneys i Hamre, Mueller	Schumann, & Larson, P.C.
R 1.363). Change of correspondence address (or Change of Chadress form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indicate PTO/SB/47; Rev 03-02 or more recent) attached. Use Number is required.	Correspondence (1) the name or agents OR (2) the name registered and of a Customer 2 registered fisted, no name	es of up to 3 registered pate, alternatively, of a single firm (having as tomey or agent) and the na patent attorneys or agents. I ne will be printed.	ent attorneys I Mueller mes of up to	Schumann, & Larson, P.C.
R 1.363). Change of correspondence address (or Change of C Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indicat PTO/SB/47; Rev 03-02 or more recent) attached. Use	Correspondence (1) the name or agents OR (2) the name registered at the of a Customer 2 registered is steed, no name of a Customer (1) the name or agents OR (2) the name or a	es of up to 3 registered pate, alternatively, of a single firm (having as torney or agent) and the us patent atomeys or agents. In me will be printed. print or type)	ent atterneys a member a mes of up to if no name is Thamre, Mueller 3	& Larson, P.C.
R 1.363). Change of correspondence address (or Change of CAddress form PTO/SB/122) attached. Fee Address indication (or "Fee Address" Indication (or "Fee Addre	Correspondence (1) the name of agents OR (2) the name registered at 2 registered plated, no name of agents OR (2) the name of agents OR (3) the name of agents OR (4) the name of agents OR (5) the name of agents OR (6) the name of agents OR (7) the name of agents OR (8) the name of agents OR (9) the name of agents OR (9) the name of agents OR (1) the name of agents OR (2) the name registered at the name of agents OR (2) the name registered at the name of agents OR (2) the name registered at the name of agents OR (2) the name registered at the name	es of up to 3 registered pate, alternatively, of a single firm (beying as comey or agent) and the ma- patent attorneys or agents. I me will be printed. print or type) or on the patent. If an assig- filing an assignment. (CITY and STATE OR CO	mes of up to if no name is 3 spece is identified below, the do 19/22/2005 HDEM ON FC:1501	& Larson, P.C. ESS2 00000027 503478
R 1.363). Change of correspondence address (or Change of CAddress form PTO/SB/122) attached. Fee Address indication (or "Fee Address" Indication (or "Fee Address" Indication (or "Fee Address" Indication (or "Fee Address" Indication/SB/47; Rev 03-02 or more recent) attached. Use Number is required. INSIGNEE NAME AND RESIDENCE DATA TO BE PLEASE NOTE: Unless an assignee is identified be recordation as set forth in 37 CFR 3.11. Completion of (A) NAME OF ASSIGNEE MATSUSHITA ELECTRIC INDUST	Correspondence (1) the name of agents OR (2) the name registered at 2 registered justed, no name of agents OR (2) the name of agents OR (3) the name of agents OR (4) the name of agents OR (5) the name of agents OR (6) the name of agents OR (7) the name of agents OR (8) the name of agents OR (9) the name of agents OR (1) the name of agents OR (2) the name of agents OR (2) the name of agents OR (3) the name of agents OR (4) the name of agents OR (5) the name of agents OR (6) the name of agents OR (7) the name of agents OR (8) the name of agents OR (9) the name of agents OR (1) the name of agents OR (2) the name of agents OR (2) the name of agents OR (2) the name of agents OR (3) the name of agents OR (4) the name of agents OR (5) the name of agents OR (6) the name of agents OR (7) the name of agents OR (8) the name of agents OR (8) the name of agents OR (9) the name of agents OR (1) the name of agents OR (1) the name of agents OR (2) the name of agents OR (1) the name of agents OR (2) the name of agents OR (3) the name of agents OR (4) the nam	es of up to 3 registered pate, alternatively, of a single firm (having as comey or agent) and the ma patent attorneys or agents. I me will be printed. print or type) or on the patent. If an assig filling an assignment. (CITY and STATE OR CO	mes of up to if no name is 3 meet is identified below, the do 09/22/2005 HDEM 01 FC:1501 AN 02 FC:1504 03 FC:8001	& Larson, P.C. ESS2 00000027 503478 1400.00 DA 300.00 DA 6.00 DA
R 1.363). Change of correspondence address (or Change of CAddress form PTO/SB/122) attached. Fee Address indication (or "Fee Address" Indication (or "Fee Addre	Correspondence (1) the name of agents OR (2) the name registered at 2 registered justed, no name of agents OR (2) the name of agents OR (3) the name of agents OR (4) the name of agents OR (5) the name of agents OR (6) the name of agents OR (7) the name of agents OR (8) the name of agents OR (9) the name of agents OR (1) the name of agents OR (2) the name of agents OR (2) the name of agents OR (3) the name of agents OR (4) the name of agents OR (5) the name of agents OR (6) the name of agents OR (7) the name of agents OR (8) the name of agents OR (9) the name of agents OR (1) the name of agents OR (2) the name of agents OR (2) the name of agents OR (2) the name of agents OR (3) the name of agents OR (4) the name of agents OR (5) the name of agents OR (6) the name of agents OR (7) the name of agents OR (8) the name of agents OR (8) the name of agents OR (9) the name of agents OR (1) the name of agents OR (1) the name of agents OR (2) the name of agents OR (1) the name of agents OR (2) the name of agents OR (3) the name of agents OR (4) the nam	es of up to 3 registered pate, alternatively, of a single firm (having as comey or agent) and the ma patent attorneys or agents. I me will be printed. print or type) or on the patent. If an assig filing an assignment. (CITY and STATE OR CO OSAKA, JAF ent): Individual Que	mes of up to if no name is 3 mes of up to if no name is 3 mee is identified below, the do it 09/22/2005 HDEM OUNTRY OUT FC:1501 PAN 02 FC:1504	& Larson, P.C. ESS2 00000027 503478 1400.00 DA 300.00 DA 6.00 DA
R 1.363). Change of correspondence address (or Change of CAddress form PTO/SB/122) attached. Fee Address indication (or "Fee Address" Indicat PTO/SB/47; Rev 03-02 or more recent) attached. Use Number is required. SSIGNEE NAME AND RESIDENCE DATA TO BE PLEASE NOTE: Unless an assignee is identified be recordation as set forth in 37 CFR 3.11. Completion of A) NAME OF ASSIGNEE MATSUSHITA ELECTRIC INDUST assecheck the appropriate assignee category or categoriate following fee(s) are enclosed:	(1) the name of agents OR (2) the name of agents OR (2) the name registered at 2 registered at 12 registered at 2 registered at 2 registered at 32 registered at 45 registered at 2 registered at 5 registered at 2 registered at 2 registered at 2 registered at 32 registered at 2 registered at 3 registere	es of up to 3 registered pate, alternatively, of a single firm (having as comey or agent) and the ma- patent attorneys or agents. I me will be printed. print or type) or on the patent. If an assig- filing an assignment. (CITY and STATE OR CO OSAKA, JAF ent): Individual (2) (c(s)): the amount of the fee(s) is e	men attorneys a member a mes of up to if no name is mes	& Larson, P.C. ESS2 00000027 503478 1400.00 DA 300.00 DA 6.00 DA
R 1.363). Change of correspondence address (or Change of CAddress form PTO/SB/122) attached. Fee Address indication (or "Fee Address" Indication (or "Fee Address" Indication (or "Fee Address" Indication (or "Fee Address" Indication/SB/47; Rev 03-02 or more recent) attached. Use Number is required. SSIGNEE NAME AND RESIDENCE DATA TO BE PLEASE NOTE: Unless an assignee is identified befrecordation as set forth in 37 CFR 3.11. Completion of (A) NAME OF ASSIGNEE MATSUSHITA ELECTRIC INDUST use check the appropriate assignee category or categori.	(1) the name or agents OR (2) the name or agents OR (2) the name registered at 2 registered itsted, no name of this form is NOT a substitute for (B) RESIDENCE: TRIAL CO., LTD. Les (will not be printed on the pate of Payment of Pe A check in the payment by Payment by	es of up to 3 registered pate, alternatively, of a single firm (having as comey or agent) and the mapatent attorneys or agents. In the will be printed. Print or type) or on the patent. If an assigning an assignment. (CITY and STATE OR COMEY and STATE OR COMEY. OSAKA, JAF ent): Individual Queens. (cis): the amount of the fee(s) is a credit card. Form PTO-203	men atterneys a member a mes of up to if no name is mes	& Larson, P.C. Comment has been eject for 183478 1400.00 DA 300.00 DA 6.00 DA ap entity Government
R 1.363). Change of correspondence address (or Change of Change o	(1) the name of agents OR (2) the name of agents OR (2) the name registered at 2 registered at 2 registered at 2 registered at 3 registered at 4 registered at 4 registered at 5 registered at 5 registered at 6 registered at 6 registered at 6 registered at 7 registered at 7 registered at 8 registered at 8 registered at 8 registered at 9 registered at 1 registered at	es of up to 3 registered pate, alternatively, of a single firm (having as comey or agent) and the mapatent attorneys or agents. In me will be printed. print or type) r on the patent. If an assignification assignment. (CITY and STATE OR COONSAKA, JAFent): Undividual State of the amount of the fee(s) is excretile and form PTO-201 or is hereby authorized by the through the patent of Number 50-34/8	ment attorneys a member a mest of up to if no name is gree is identified below, the do 09/22/2005 HDEN OUNTRY O1 FC:1501 PAN 02 FC:1504 03 FC:8001 Corporation or other private ground canclosed. 38 is attached. charge the required fec(s), or concepts an extra concepts.	& Larson, P.C. Comment has been filed for 182478 ESS2 00000027 503478 1400.00 DA 300.00 DA 6.00 DA countity Government
R 1.363). Change of correspondence address (or Change of Change o	(1) the name of agents OR (2) the name of agents OR (2) the name registered at 2 registered at 2 registered at 3 registered at 4 registered at 4 registered at 5 registered at 5 registered at 5 registered at 6 registered at 6 registered at 7 registered at 7 registered at 8 registered at 8 registered at 9 registered at 9 registered at 1 registered at	es of up to 3 registered pate, alternatively, of a single firm (having as comey or agent) and the mapatent attorneys or agents. In me will be printed. Print or type) To on the patent. If an assignification assignment. (CITY and STATE OR COONSAKA, JAFent): Undividual (20) (CSAKA, JAFent): Undividual (20) (CS): The amount of the fee(s) is a credit card. Form PTO-203 or is hereby authorized by the single part of Number 50-34/8.	ment attorneys a member a mes of up to if no name is 3 mee is identified below, the do 09/22/2005 HDEM OUNTRY) O1 FC:1501 PAN 02 FC:1504 03 FC:8001 Corporation or other private grounds as is attached. charge the required fec(s), or ce (enclose an extra co	& Larson, P.C. Comment has been filed for 182478 1400.00 DA 300.00 DA 6.00 DA contity Government
R 1.363). Change of correspondence address (or Change of Change o	(1) the name of agents OR (2) the name of agents OR (2) the name registered at 2 registered at 2 registered at 3 registered at 4 registered at 4 registered at 5 registered at 5 registered at 5 registered at 6 registered at 6 registered at 7 registered at 7 registered at 8 registered at 8 registered at 9 registered at 9 registered at 1 registered at	es of up to 3 registered pate, alternatively, of a single firm (having as comey or agent) and the mapatent attorneys or agents. In will be printed. print or type) or on the patent. If an assignation of a single filling an assignation. (CITY and STATE OR COON (CITY an	ment attorneys a member a mes of up to if no name is 3 mee is identified below, the do 09/22/2005 HDEM OUNTRY) O1 FC:1501 PAN 02 FC:1504 O3 FC:8001 Corporation or other private ground on the private ground of the	& Larson, P.C. Comment has been filed for 182478 1400.00 DA 300.00 DA 6.00 DA contity Government
R 1.363). Change of correspondence address (or Change of Chaddress form PTO/SB/122) attached. Prec Address indication (or "Fee Address Indicat PTO/SB/17, Rev 03-02 or more recent) attached. Use Number is required. SSIGNEE NAME AND RESIDENCE DATA TO BE PLEASE NOTE: Unless an assignee is identified belecordation as set forth in 37 CFR 3.11. Completion of A) NAME OF ASSIGNEE MATSUSHITA ELECTRIC INDUST use check the appropriate assignee category or categori. The following fee(s) are enclosed: Itsue Fee Publication Fee (No small entity discount permitted Advance Order - # of Copies Advance Order - # of Copies Advance Order - # of Copies A pplicant claims SMALL ENTITY status. See 3: Director of the USPTO is requested to apply the Issue IE: The Issue Fee and Publication Fee (if required) the rest as shown by the records of the United States Paten surtherized Signature	(1) the name of agents OR (2) the name of agents OR (2) the name registered at 2 registered at 2 registered at 2 registered at 3 registered at 4 registered at 4 registered at 5 registered at 5 registered at 6 registered at 6 registered at 7 registered at 7 registered at 8 registered at 8 registered at 9 registered at	es of up to 3 registered pate, alternatively, of a single firm (having as comey or agent) and the mapatent attorneys or agents. In will be printed. print or type) r on the patent. If an assignation of a single filing an assignation. (CITY and STATE OR COONSAKA, JAFfent): Undividual State of the fee(s) is the amount of the fee(s) is credit early form PTO-202 or is hereby authorized by other state of the feeth authorized by the single filing and specific transfer of the feeth authorized by the single feeth authorized by	ment attorneys a member a mest of up to if no name is 3 guee is identified below, the do 09/22/2005 HDEN OUNTRY 01 FC:1501 PAN 02 FC:1504 03 FC:8001 Corporation or other private ground enclosed. 38 is attached. charge the required fee(s), or concluded the required fee(s), or concluded the private ground issue fee to the applicating issue fee to the applicating issued attorney or agent; or the september 21, 2005	& Larson, P.C. Comment has been filed for 182478 1400.00 DA 300.00 DA 6.00 DA contity Government
R 1.363). Change of correspondence address (or Change of Chaddress from PTO/SB/122) attached. Prec Address indication (or "Fee Address Indicat PTO/SB/17, Rev 03-02 or more recent) attached. Use Number is required. SSIGNEE NAME AND RESIDENCE DATA TO BE PLEASE NOTE: Unless an assignee is identified between data as set forth in 37 CFR 3.11. Completion of A) NAME OF ASSIGNEE MATSUSHITA ELECTRIC INDUST use check the appropriate assignee category or categori. The following fee(s) are enclosed: Itsue Fee Publication Fee (No small entity discount permitted Advance Order - # of Copies Advance Order - # of Copies Advance Order - # of Copies Applicant claims SMALL ENTITY status. See 3: Director of the USPTO is requested to apply the Issue Fie: The Issue Fee and Publication Fee (if required) when the sease as shown by the records of the United States Paten authorized Signature	(1) the name or agents OR (2) the name or agents OR (2) the name of agents OR (2) the name registered at 2 registered at 2 registered at 2 registered at 3 registered at 3 registered at 4 registered at 4 registered at 5 registered at 5 registered at 6 registered at 6 registered at 6 registered at 7 registered at 8 reg	es of up to 3 registered pate, alternatively, of a single firm (having as comey or agent) and the mapatent attorneys or agents. In will be printed. print or type) on the patent. If an assignification assignment. (CITY and STATE OR CC OSAKA, JAFfent): Individual QC (es): the amount of the fee(s) is a credit card. Form PTO-20: or is hereby authorized by on Number 50-3478 t is no longer claiming SMA (es) to the than the applicant; a rejudical patents of the fee individual case. Any control of the control of the setting of the control of	ment attorneys a member a mest of up to if no name is 3 meet is identified below, the do 09/22/2005 HDEM OUNTRY OF C: 1504 03 FC: 8001 Corporation or other private ground canciosed. 38 is attached. charge the required fee(s), or centrology and issue fee to the applicate gratery and insure fee to the application of the complete including comments on the amount of time dependents of the complete, including comments on the amount of time dependents of the cuts. Dependents of the cuts of the cuts. See the cuts of the c	ESS2 00000027 503478 1400.00 DA 300.00 DA 6.00 DA centity Government redit any overpayment, to py of this form). R 1.27(g)(2). Ion identified above. assignee or other party in by the USPTO to process) gathering, preparing, and e you require to complete timent of Commerce, P.O. or Patents, P.O. Box 1450,